UNITED STATES PATENT & TRADEMARK OFFICE Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND						
1 Date of Request: 11105 2 Serial/Patent # 10/52/744						
3 Please refund the following fee(s):			PAPE NUME		5 DATE FILED	6 AMOUNT
X	Filing					\$ 100.00
	Amendment					\$
	Extension of Time					\$
	Notice of Appeal/Appeal					\$
	Petition					\$
	Issue					\$
i.	Cert of Correction/Terminal Disc.					\$
	Maintenance					\$
	Assignment					\$
	Other					\$
()ne		7	7 TOTAL AMOUNT OF REFUND			\$ 100.00
		8	8 TO BE REFUNDED BY:			
10 REASON:			Treasury Check			
X	Overpayment			C	redit Dep	osit A/C #:
/	Duplicate Payment		9	, [0	15-1	327
	No Fee Due (Explanation):	<u> </u>				•
11 REFUND REQUESTED BY:						
TYPED/PRINTED NAME:			TITLE:			
SIGNATURE:			PHONE:			
OFFICE:						
THIS SPACE RESERVED FOR FINANCE USE ONLY:						
APP	APPROVED: DATE:					

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance Refund Branch Crystal Park One, Room 802B

PORM PTO 1577 (01/90)